Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1)						SMALL ENTITY TYPE TYPE			VTITY	OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							RA	TE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			C FEE		OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/, minus 20= *		*		X\$	9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*		X4	0=		OR	X80=		
MU	LTIPLE DEPENC	DENT CLAIM PI	RESENT				+13	35=		OR	+270=		
* If the difference in column 1 is less than zero, entér "0" in column 2							ТО	TAL	355	OR	TOTAL		
CLAIMS AS AMENDED - PART II										ı	OTHER	THAN	
	(Column 1) (Column 2) (Column 3							ALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST BBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	<b>±</b>	Minus	**	· • • • • • • • • • • • • • • • • • • •	=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	T CLAIM	=	X4	-0=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							35=		OR	+270=		
										OR	TOTAL ADDIT. FEE		
		ADDI <sup>*</sup>				7.0011.1 62							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	X\$	9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	X4	0=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
	*							35=		OR	+270=		
		ADDI	OTAL . FEE		OR	TOTAL ADDIT. FEE							
_		(Column 3)				•							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N N	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	,	
BE	Independent	*	Minus	***	,	=	X4	0=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									:	.076		
	If the entry in colu	mn 1 is less than	the entry in colu	mn 2 wri	te "0" in co	olumn 3		35=		OR	+270=		
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												